

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

Joel R. Spivack, Esquire JS1654
Law Office of Joel R. Spivack
1415 Marlton Pike East, Suite 302
Cherry Hill, NJ 08034
(856) 488-1200
Counsel for Debtor

In Re:

Patricia Russell-Chapman

Case No.: 21-13934

Judge: JNP

Chapter: 13

CHAPTER 13 DEBTOR'S CERTIFICATION IN OPPOSITION

The debtor in this case opposes the following (**choose one**):

1. ☐ Motion for Relief from the Automatic Stay filed by _____, creditor,

A hearing has been scheduled for _____, at _____.

- ☐ Motion to Dismiss filed by the Chapter 13 Trustee.

A hearing has been scheduled for _____, at _____.

- ☐ Certification of Default filed by _____,

I am requesting a hearing be scheduled on this matter.

2. I oppose the above matter for the following reasons (**choose one**):

☒ Payments have been made in the amount of \$ 3,344.00, but have not been accounted for. Documentation in support is attached.

☐ Payments have not been made for the following reasons and debtor proposes repayment as follows (**explain your answer**):

☒ Other (**explain your answer**):

Based on the paperwork attached there is an escrow/suspense balance of \$7,744.51 that has not been applied to my account. I request that both this escrow/suspense amount + the payments of \$3,344.00 mentioned above which I paid in January 2023 be applied to the account. Once these amounts are applied, I am seeking a 6 month cure to catch up, first payment March 1, 2023.

3. This certification is being made in an effort to resolve the issues raised in the certification of default or motion.
4. I certify under penalty of perjury that the above is true.

Date: 2/9/2023

/s/ Patricia Russell-Chapman
Debtor's Signature

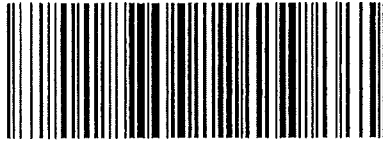
Date: _____

Debtor's Signature

NOTES:

1. Under D.N.J. LBR 4001-1(b)(1), this form must be filed with the court and served on the Chapter 13 Trustee and creditor, if applicable not later than 7 days before the date of the hearing if filed in opposition to a Motion for Relief from the Automatic Stay or Chapter 13 Trustee's Motion to Dismiss.
2. Under D.N.J. 4001-1 (b)(2), this form must be filed with the court and served on the Chapter 13 Trustee and creditor, if applicable not later than 14 days after the filing of a Certification of Default.

KML Law Group, P.C.
PO BOX 500980
SAN DIEGO, CA 92150-0980



(11) 969 0024 8435 0866 3

Russell-Chapman, Patricia aka Patricia R Chapman
5918 Maple Drive
Mays Landing, NJ 08330

A standard linear barcode representing the address information above it.

Mailed On: 1/17/2023 **Order Number:** 0236569-01
ClientID: KML_Law_000606 FC **Reference Number:** NJ71712



A large, solid black square composed of a 100x100 grid of 'X' characters. The 'X' characters are arranged in a regular, repeating pattern, filling the entire square area. The characters are black on a white background, creating a high-contrast, textured appearance. The grid is perfectly uniform, with no variations in spacing or alignment.

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY
Caption in Compliance with D.N.J. LBR 9004-1(b)

KML Law Group, P.C.
By: Denise Carlon Esquire
701 Market Street, Suite 5000
Philadelphia, PA 19106
215-627-1322
Attorneys for Secured Creditor: U.S. Bank National
Association, not in its individual capacity but solely as
indenture trustee, for the holders of the CIM Trust 2020-
R3, Mortgage-Backed Notes, Series 2020-R3

Case No.: 21-13934 JNP

Chapter: 13

In Re:

Patricia Russell-Chapman aka Patricia R
Chapman

Debtor/Respondent

Co-Debtor/Respondent

Judge: Jerrold N. Poslusny Jr.

CERTIFICATION OF SERVICE

1. I, Denise Carlon Esquire:

- ☒ Represent the Secured Creditor in the above-captioned matter.
- ☐ am the secretary/paralegal for , who represents the Secured Creditor in the above captioned matter.
- ☐ am the _____ in the above case and am representing myself.

2. On 01/16/2023, I sent a copy of the following pleadings and/or documents to the parties listed in the chart below:

- Notice of Mortgage Payment Change
- Certification of Service

3. I certify under penalty of perjury that the above document were sent using the mode of service indicated.

Dated: 01/16/2023

/S/ Denise Carlon Esquire
Signature : Denise Carlon Esquire



Name and Address of Party Served	Relation of Party to the Case	Mode of Service
Patricia Russell-Chapman aka Patricia R Chapman 5918 Maple Drive Mays Landing, NJ 08330	Debtor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
	Co-Debtor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Joel R. Spivack Spivack, Joel R. 1415 Marlton Pike East Suite 302 Cherry Hill, NJ 08034	Attorney for Debtor	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Notice of Electronic Filing (NEF) <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Isabel C. Balboa Esq. Balboa, Isabel C. Chapter 13 Standing Trustee Cherry Tree Corporate Center - 535 Route 38 - Suite 580 Cherry Hill, NJ 08002	Chapter 13 Trustee	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Notice of Electronic Filing (NEF) <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

Table 4 below shows a detailed projection of future estimated escrow activity of your escrow account transactions since your last analysis as well as a projection of future escrow activity. The double asterisk (**) next to the required balance indicates the lowest projected balance in the analysis. This low balance is used to determine the surplus or shortage in your escrow account at the time of this analysis.

Table 4

<u>Month</u>	<u>Description</u>	<u>Payments Estimate</u>	<u>Disbursements Estimate</u>	<u>Beginning Balance</u>	<u>Required Balance</u>
	Starting Balance			\$7,744.51	\$722.46
May 2023		478.02	0.00	8,222.53	1,200.48
June 2023		478.02	0.00	8,700.55	1,678.50
July 2023	CITY TAX	478.02	1,127.51	8,051.06	1,029.01
August 2023		478.02	0.00	8,529.08	1,507.03
September 2023		478.02	0.00	9,007.10	1,985.05
October 2023	CITY TAX	478.02	1,127.50	8,357.62	1,335.57
November 2023	FLOOD INS	478.02	688.00	8,147.64	1,125.59
December 2023		478.02	0.00	8,625.66	1,603.61
January 2024	CITY TAX	478.02	1,122.63	7,981.05	959.00
January 2024	HAZARD INS	0.00	959.00	7,022.05	0.00**
February 2024		478.02	0.00	7,500.07	478.02
March 2024		478.02	0.00	7,978.09	956.04
April 2024	CITY TAX	478.02	711.61	7,744.50	722.45

If you wish to send a written inquiry about your account or dispute any of the information on this statement, please send it to the address listed below for Notice of Error/Information Request. If you send your Notice of Error/Information Request to any other address, it may not be processed in accordance with the guidelines established by the Real Estate Settlement Procedures Act (RESPA).

Important Mailing Addresses:

<u>General Correspondence</u>	<u>Payment Remittance</u>	<u>Notice of Error/Information Request</u>
PO Box 65250 Salt Lake City, UT 84165-0250	PO Box 65450 Salt Lake City, UT 84165-0450	PO Box 65277 Salt Lake City, UT 84165-0277

[†] Refund Information

Although our analysis determined an overage in your escrow account, a check may not be issued. This may be due to one or more of the following.

- An overage refund that exceeds your current escrow balance may not be refunded in one check. Funds currently available and held in escrow will be refunded, but any remaining difference between the previous refund and the full refund will be sent once the funds become available in the escrow account. If the additional funds are not available in the escrow account within 30 days of this statement, please contact us to review your account to determine if any additional refund is available to be sent. The refund amount from statement is a projection of the funds that will be in your account in the future, not the amount of the funds that are currently in your account.
- Overages are not refunded when an account is delinquent. Please review your payment history and due date for your account. If it is 90 days or greater past due, an escrow refund will not be sent until the payments have been made. Once your mortgage payments are current, please request a refund of your escrow overage amount. Your refund amount may vary at that time from the amount listed on this statement as additional escrow activity may change the amount eligible for a refund.

If your account is set up on a monthly automatic withdrawal payment option, your monthly payment withdrawal amount will be updated according to the adjusted payment above once the escrow analysis becomes effective. If you have any questions or concerns, please contact our Customer Service Department. Our toll-free number is 800-258-8602 and representatives are available Monday through Friday between the hours of 8 a.m. and 9 p.m., and Saturday from 8 a.m. to 2 p.m., Eastern Time. You may also visit our website at www.spservicing.com.

Sincerely,

Select Portfolio Servicing, Inc.

Esta carta contiene información importante concerniente a sus derechos. Por favor, traduzca esta carta. Nuestros representantes bilingües están a su disposición para contestar cualquier pregunta. Llámenos al numero 800-831-0118 y seleccione/marque la opción 2.

This information is intended for informational purposes only and is not considered an attempt to collect a debt.



B. **Escrow Reserve Requirements** – RESPA/Federal law allows lenders to maintain a maximum of two months reserve in your escrow account, commonly referred to as a cushion. However, based on state, investor, or modification requirements your cushion requirement may be less than the Federal requirement. Your account has a monthly reserve requirement of 0 months.

C. **Escrow Surplus** – The actual beginning balance on your account in Tables 3 and 4 is \$7,744.51. According to the projections shown in Tables 3 and 4, your required beginning balance should be \$722.46.

This means you have a surplus of \$7,022.05. If your account meets minimum criteria defined below, we will send a refund check for this surplus under separate cover for the full or partial refund¹.

Please be advised that this is not an attempt to collect any pre-petition debt, which we have previously claimed on the Proof of Claim.

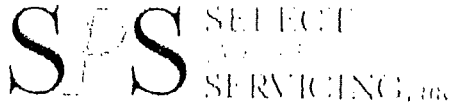
Your unpaid pre-petition escrow amount is \$6,356.42. This amount has been removed from the projected starting balance.

Your total refund is \$7,022.05, which is determined by subtracting your required beginning escrow account balance from your actual beginning escrow account balance. $\$7,744.51 - \$722.46 = \$7,022.05$.

Table 3 below shows a detailed history of your escrow account transactions since your last analysis. An asterisk (*) indicates a difference from a previous estimate in either the date or the amount. The letter E beside an amount indicates that the payment or disbursement has not yet occurred but is estimated to occur as shown prior to the effective date of this new analysis. Please note, if the payment or disbursement month shown in table 3 is the same month of this completed analysis and there is an asterisk (*) or the letter E next to the amount, the disbursement or amount may have already occurred by the time you receive this analysis statement and the actual amount may differ from the amount reflected below.

Table 3

Month	Description	Payments		Disbursements		Total Balance
		Estimate	Actual	Estimate	Actual	
History	Beginning Balance					\$-1,528.14
June 2022		498.13	1,018.81 E	0.00	0.00	-509.33
July 2022	CITY TAX	498.13	0.00 E	1,264.92	0.00 *	-509.33
August 2022	CITY TAX	498.13	1,930.26 E	0.00	1,127.51 *	293.42
September 2022	FLOOD INS	498.13	0.00 E	0.00	688.00 *	-394.58
October 2022	CITY TAX	498.13	911.31 E	980.33	1,127.50 *	-610.77
November 2022	FLOOD INS	498.13	529.29 E	611.00	0.00 *	-81.48
December 2022	HAZARD INS	498.13	381.19 E	0.00	964.00 *	-664.29
January 2023	CITY TAX	498.13	8,748.65 E	1,122.63	1,122.63	6,961.73
January 2023	HAZARD INS	0.00	0.00 E	876.00	0.00 *	6,961.73
February 2023		498.13	498.13 E	0.00	0.00 E	7,459.86
March 2023		498.13	498.13 E	0.00	0.00 E	7,957.99
April 2023	CITY TAX	498.13	498.13 E	1,122.63	711.61 E	7,744.51



January 12, 2023

ATRICIA CHAPMAN
STATE OF AVON CHAPMAN
918 MAPLE DRIVE
MAYS LANDING, NJ 08330-0000

Account Number: [REDACTED]
Property Address: 5918 MAPLE DRIVE
MAYS LANDING, NJ 08330

RE: Important notice regarding your Annual Escrow Account Disclosure Statement and your new escrow payment amount

This statement is for informational purposes only

Dear Customer(s):

SPS reviewed your escrow account to determine your new monthly escrow payment. Following are the answers to the most common questions we receive about the escrow account and the details related to the analysis.

1. What is the amount of my new monthly payment?

The table below shows your new monthly payment, including any escrow changes from this new analysis statement.

Table 1	Current Payment (As of last analysis)	New Payment (as of 05/01/2023)	Change
Principal and Interest		\$1,142.94	
Regular Escrow Payment	\$498.13	\$478.02	\$-20.11
Monthly Shortage Payment	\$0.00	\$0.00	\$0.00
Total Payment		\$1,620.96	\$-20.11

Since you are in active bankruptcy, your new payment amount shown above is the post-petition payment amount due.

2. Why did the escrow portion of my payment change?

There are three main reasons why your escrow account payment may change from year to year.

- A. Regular Escrow Payments - Changes occur based on differences between the expected property tax or insurance payments for the prior year and the expected property tax or insurance payments for the current year. Table 2 shows those differences and any resulting monthly shortage change, which is explained in section C.

Table 2	Prior Year Estimated Disbursements (As of last analysis)	Current Year Estimated Disbursements (as of 05/01/2023)	Change
Tax Disbursements	\$4,490.51	\$4,089.25	\$-401.26
Hazard Insurance Disbursements	\$1,487.00	\$1,647.00	\$160.00
Total Annual Escrow Disbursements	\$5,977.51	\$5,736.25	\$-241.26
Monthly Escrow Payment	\$498.13	\$478.02	\$-20.11
Monthly Shortage Payment	\$0.00	\$0.00	\$0.00



See reverse side

Debtor: Patricia Chapman Case Number (if known): 21-13934

First Name Middle Name Last Name

Part 3: Other Payment Change

3. Will there be a change in the debtor's mortgage payment for a reason not listed above?

☒ No☐ Yes. Attach a copy of any documents describing the basis for the change, such as a repayment plan or loan modification agreement. (Court approval may be required before the payment change can take effect.)

Reason for change: _____

Current mortgage payment: \$ _____ New mortgage payment: \$ _____

Part 4: Sign Here

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number.

Check the appropriate box.

☐ I am the creditor.☒ I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this Notice is true and correct to the best of my knowledge, information, and reasonable belief.

x/s/ Denise Carlon

Signature

Date January 16, 2023

Print: Denise Carlon
First Name Middle Name Last NameTitle Attorney for CreditorCompany KML Law Group, P.C.Address 701 Market Street, Suite 5000
Number Street

Philadelphia, PA 19106

City State ZIP Code

Contact phone (215) 627-1322

Email dcarlon@kmlawgroup.com

Fill in this information to identify the case:Debtor 1 Patricia ChapmanDebtor 2
(Spouse, if filing)United States Bankruptcy Court for the District Of New JerseyCase number 21-13934

Official Form 410S1

Notice of Mortgage Payment Change**12/15**

If the debtor's plan provides for payment of post petition contractual installments on your claim secured by a security interest in the debtor's principal residence, you must use this form to give notice of any changes in the installment payment amount. File this form as a supplement to your proof of claim at least 21 days before the new payment amount is due. See Bankruptcy Rule 3002.1.

Name of creditor: U.S. Bank National Association, not in its individual capacity but solely as indenture trustee, for the holders of the CIM Trust 2020-R3, Mortgage-Backed Notes, Series 2020-R3

Court claim no. (if known): 11

Last four digits of any number
you use to identify the debtor's account: 9159

Date of payment change: 05/01/2023
Must be at least 21 days after date of this notice

New total payment: \$ 1620.96

Principal, interest, and escrow, if any

Part 1: Escrow Account Payment Adjustment

1. Will there be a change in the debtor's escrow account payment?

☐ No

☒ Yes. Attach a copy of the escrow account statement prepared in a form consistent with applicable nonbankruptcy law. Describe the basis for the change. If a statement is not attached, explain why: _____

Current escrow payment: \$498.13New escrow payment: \$478.02**Part 2: Mortgage Payment Adjustment**

2. Will the debtor's principal and interest payment change based on an adjustment to the interest rate in the debtor's variable-rate note account?

☒ No

☐ Yes. Attach a copy of the rate change notice prepared in a form consistent with applicable non bankruptcy law. If a notice is not attached, explain why: _____

Current interest rate: _____ %

New interest rate: _____ %

Current principal and interest payment: \$ _____ New principal and interest payment: \$ _____





RECEIPT/RECIBO
Thank you/Gracias

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVIO:
649-113-4239

For Customer Service, please call 1-800-325-6000/Para comunicarse con el servicio de atención al cliente, llame al 1-800-325-6000

My WU# #
Total Points/Puntos totales:

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT 3966, NJ

Payments/Servicio de Pago de Facturas:
CASH

Operator ID/No. ID del Operador: 362

Date of Transaction/Fecha de Transacción: January 11, 2023/Enero 11, 2023	
Time of Transaction/Hora de la Transacción: 09:42 AM EST	
Sender/Remitente: PATRICIA R CHAPMAN 5918 MAPLE DR, ML, NJ, 08330, USA 6099922832/ 6099922832	
Receiver/Destinatario: SELECT PORTFOLIO SERVICING	
Account #/ No de Cuenta:	0023529159
Code City/ Código de la Ciudad:	OSWALD UT
Reference #/ No. de Referencia:	NONE
Expected Payout Location/ Localidad donde Esperan Pago: United States	
Service Type/Tipo de Servicio: Wire	
Transfer Amount/ Cantidad de Envío:	1,672.00 USD
Transfer Fees/ Cargos por Envío:	19.99 USD
Additional Fees/ Cargos Adicionales:	+ 0.00 USD
Transfer Taxes/ Impuestos de Envío:	+ 0.00 USD
Promotion Discount/ Descuento Promocional:	- USD
Total / Total:	1,691.99 USD
Total to Receiver/Total al Destinatario:	1,672.00 USD

For inquiries or comments in English, please write

Executive Cash Services
4450 Black Horse Pike Suite 3966
Mays Landing, NJ 08330
(609) 829-2572

Thank You For Your Business!

9:42:25 am Wed Jan 11, 2023

STORE # 5
CAMERA # 051
TELLER Teller 362
CUSTOMER # 65_65256

WU Send -1691.99
CASH TENDERED \$1700.00
CHANGE DUE \$8.01

9:42:39 am Wed Jan 11, 2023
RECEIPT # 23010349455051



RECEIPT/RECIBO

Thank you/Gracias

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVIO:
078-657-8487

For Customer Service, please call 1-800-325-6000/Para comunicarse con el servicio de atención al cliente, llame al 1-800-325-6000

My WU# #
Total Points/Puntos totales

EXECUTIVE CASH SERVICES
4460 BLACK HORSE PIKE, UNIT 3966, NJ

Payments/Servicio de Pago de Facturas:
CASH

Operator ID/No. ID del Operador 362

Date of Transaction/Fecha de Transacción: January 05, 2023/Enero 05, 2023	
Time of Transaction/Hora de la Transacción: 04:23 PM EST	
Sender/Remitente: PATRICIA R CHAPMAN 5918 MAPLE DR., ML, NJ, 08330, USA 6099922832/ 6099922832	
Receiver/Destinatario: SELECT PORTFOLIO SERVICING	
Account #/ No de Cuenta:	0023529159
Code City/ Código de la Ciudad:	OSWALD UT
Reference #/ No. de Referencia:	NONE
Expected Payout Location/ Localidad donde Esperan Pago: United States	
Service Type/Tipo de Servicio: Urgent	
Transfer Amount/ Cantidad de Envío	1,672.00 USD
Transfer Fees/ Cargos por Envío:	19.99 USD
Additional Fees/ Cargos Adicionales:	0.00 USD
Transfer Taxes/ Impuestos de Envío:	0.00 USD
Promotion Discount/ Descuento Promocional:	USD
Total / Total:	1,691.99 USD
Total to Receiver/Total al Destinatario:	1,672.00 USD

For inquiries or comments in English, please write to:/Para consultas o comentarios en español, escriba a:

WESTERN UNION
P.O. Box 6036,
Englewood, CO 80155

Thank you/Gracias

720-259-5506

International money transfer services are provided

[illegible]



RECEIPT/RECIBO

Thank you/Gracias

TRACKING NUMBER (MTCN)
NO. DE CONTROL DEL ENVIO:
031-740-1323

For Customer Service, please call 1-800-325-6000/Para comunicarse con el servicio de atención al cliente, llame al 1-800-325-6000

My WU#:
Total Points/Puntos totales:

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT 3866, NJ

Payments/Servicio de Pago de Facturas:
CASH

Operator ID/No. ID del Operador: 362

Date of Transaction/Fecha de Transacción: August 10, 2022/Agosto 10, 2022	
Time of Transaction/Hora de la Transacción: 11:47 AM EDT	
Sender/Remitente: PATRICIA R CHAPMAN 5918 MAPLE DR, ML, NJ, 08330, USA 6099922832/ 6099922832	
Receiver/Destinatario: SELECT PORTFOLIO SERVICING	
Account #/ No de Cuenta:	0023529159
Code City/ Código de la Ciudad:	OSWALD UT
Reference #/ No. de Referencia:	NONE
Expected Payout Location/ Localidad donde Esperan Pago: United States	
Service Type/Tipo de Servicio: Urgent	
Transfer Amount/ Cantidad de Envío:	1,672.00 USD
Transfer Fees/ Cargos por Envío:	19.99 USD
Additional Fees/ Cargos Adicionales:	+ 0.00 USD
Transfer Taxes/ Impuestos de Envío:	+ 0.00 USD
Promotion Discount/ Descuento Promocional:	- USD
Total / Total:	1,691.99 USD
Total to Receiver/Total al Destinatario:	1,072.00 USD

For inquiries or comments in English, please write to:/Para consultas o comentarios en español, escriba a:

WESTERN UNION
P.O. Box 6036,

Executive Cash Services
4450 Black Horse Pike Unit 3866
Maple Landing, NJ 08060
(609) 609-0510

Thank You For Your Business!

11:45:49 am Wed Aug 10, 2022

STORE #
CAMERA #
TELLER #
CUSTOMER #

WU Send -1591.99
CASH TENDERED 1072.00
CHANGE DUE 19.99

11:47:10 am Wed Aug 10, 2022
RECEIPT # 2202-425285051



RECEIPT/RECIBO

Thank you/Obrigado

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVIO:
656-890-3373

For Customer Service, please call 1-800-325-6000/Para comunicarse con el servicio de atención al cliente, llame al 1-800-325-6000

My WU# #
Total Points/Puntos totales:

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT-8966, NJ

Payments/Servicio de Pago de Facturas:
CASH

Operator ID/No. ID del Operador: 321

Date of Transaction/Fecha de Transacción: August 05, 2022/Agosto 05, 2022	
Time of Transaction/Hora de la Transacción: 02:31 PM EDT	
Sender/Remitente: PATRICIA R CHAPMAN 5918 MAPLE DR, ML, NJ, 08330, USA 6099922832/ 6099922832	
Receiver/Destinatario: SELECT PORTFOLIO SERVICING	
Account #/ No de Cuenta:	0023529159
Code City/ Código de la Ciudad:	OSWALD UT
Reference #/ No. de Referencia:	NONE
Expected Payout Location/ Localidad donde Esperan Pago: United States	
Service Type/Tipo de Servicio: Urgent	
Transfer Amount/ Cantidad de Envío:	600.00 USD
Transfer Fees/ Cargos por Envío:	17.99 USD
Additional Fees/ Cargos Adicionales:	+ 0.00 USD
Transfer Taxes/ Impuestos de Envío:	+ 0.00 USD
Promotion Discount/ Descuento Promocional:	- USD
Total / Total:	617.99 USD
Total to Receiver/Total al Destinatario:	600.00 USD

For inquiries or comments in English, please write to/Para consultas o comentarios en español, escriba a:

WESTERN UNION
P.O. Box 6036,
Englewood, CO 80155



RECEIPT/RECIBO
Thank you/Gracias

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVÍO:
037-704-5794

For Customer Service, please call 1-800-325-6000.
Para comunicarse con el servicio de atención al cliente, llame al 1-800-325-6000.

My/Western #
Total Points/Puntos Totales

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT 3966, NJ

Payments/Servicio de Pago de Facturas
CASH

Operación Hecho 10 del Operador 1021

Date of Transaction/fecha de transacción July 30, 2021/Julio 30, 2021	
Time of Transaction/Hora de la transacción 12:04 PM EDT	
Sender/Remitente PATRICIA R CHAPMAN 5918 MAPLE DR, ML, NJ, 08330, USA 6099922832; 6099922832	
Receiver/Destinataria SELECT PORTFOLIO SERVICING	
Account #/ No de Cuenta	0023529159
Code City/ Código de la Ciudad	OSWALD UT
Reference #/ No. de Referencia	NONE
Exported Payment Location/ Localidad donde Esporan Pago United States	
Service Type/Tipo de Servicio Urgent	
Transaction Amount/ Cantidad de Transacción	1,692.99 USD
Transfer Taxes/ Cargos por Envío	12.09 USD
Additional Fees/ Cargos Adicionales	+ 0.00 USD
Transfer Taxes/ Impuestos de Envío	+ 0.00 USD
Promotion Discount/ Descuento Promocional	- USD
Total / Total	1,692.99 USD
Total to Receiver/Total al Destinatario	1,674.00 USD

For inquiries or comments in English, please write to:
Para consultas o comentarios en español,
escriba a:
WESTERN UNION
P.O. Box 8036,
Englewood, CO 80155

International money transfer services are provided

Executive Cash Services
4450 Black Horse Pike Suite 3966
Mays Landing, NJ 08330
(609) 829-2572

Thank You For Your Business!

12:04:45 pm Fri Jul 30, 2021

STORE # 5

CAMERA # 051

TELLER TELLER 321

CUSTOMER # 55_65256

MU Send -1692.99

CASH TENDERED \$1700.00

CHANGE DUE \$7.01

12:04:53 pm Fri Jul 30, 2021

RECEIPT # 21210434855051



RECEIPT/RECIBO

Thank you/Gracias

TRACKING NUMBER (MTN)/
NO. DE CONTROL DEL ENVIO:
577-635-2803

For Customer Service, please call 1-800-325-6000.
Para comunicarse con el servicio de atención al cliente, llame al 1-800-325-6000

My WU#:
Total Points/Puntos Totales:

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT 3966, NJ

Payment/Service de Pago de Facturas:
CASH

Operator ID/No. ID del Operador: 321

Date of Transaction/Fecha de Transacción: July 20, 2022/Julio 20, 2022	
Time of Transaction/Hora de la Transacción 03:44 PM EDT	
Sender/Remitente: PATRICIA R CHAPMAN 5918 MAPLE DR, ML, NJ, 08330, USA 6099922832/ 6099922832	
Receiver/Destinatario: SELECT PORTFOLIO SERVICING	
Account #/ No de Cuenta:	0023529159
Code City/ Código de la Ciudad:	OSWALD UT
Reference #/ No. de Referencia:	NONE
Expected Payout Location/ Localidad donde Esperan Pago: United States	
Service Type/Tipo de Servicio: Urgent	
Cargos de Envío:	
Transfer Fees/ Cargos por Envío:	19.99 USD
Additional Fees/ Cargos Adicionales:	+ 0.00 USD
Transfer Taxes/ Impuestos de Envío:	+ 0.00 USD
Promotion Discount/ Descuento Promocional:	- USD
Total / total:	1,694.99 USD
Total to Receiver/Total al Destinatario:	1,075.00 USD

For Inquiries or comments in English, please write to:
Para consultas o comentarios en español, escriba a:

WESTERN UNION
P.O. Box 6036
Española, CO 81035



MAYS LANDING
5306 ATLANTIC AVE
MAYS LANDING, NJ 08330-9998
(800) 275-8777

06/08/2022 02:05 PM

Product	Qty	Unit Price	Price
---------	-----	------------	-------

Money Order			\$1000.00
-------------	--	--	-----------

Serial#: 28020098340

Money Order Fee \$1.95

Total \$1001.95

Money Order			\$760.00
-------------	--	--	----------

Serial#: 28020098351

Money Order Fee \$1.95

Total \$761.95

Grand Total: \$1763.90

Debit Card Remitted \$1763.90

Card Name: VISA

Account #: XXXXXXXXXX2455

Approval #: 030432

Transaction #: 080

Receipt #: 041393

Debit Card Purchase: \$1,763.90

AID: A000000980840 Chip

AL: US DEBIT

PIN: Verified

Every household in the U.S. is now
eligible to receive a third set
of 8 free test kits.
Go to www.covidtests.gov

Preview your Mail
Track your Packages
Sign up for FREE @
<https://informedelivery.usps.com>

All sales final on stamps and postage.
Refunds for guaranteed services only.
Thank you for your business.

Tell us about your experience.
Go to <https://postalexperience.com/Pos>
or scan this code with your mobile device.



or call 1-800-410-7420.

UFN: 334980-0830
Receipt #: 840-60800171-2-6092197-1
Clerk: 11

6
JL 7/1



RECEIPT/RECIBO

Thank you/Gracias

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVÍO:
439-749-6042

For Customer Service, please call 1-800-325-6000/Para comunicarse con el servicio de atención al cliente llame al 1-800-325-6000

My WU# #
Total Points/Puntos totales:

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT 3966, NJ

Payments/Service de Pago de Facturas:
DEBIT

Authorization Code/Código de
Autorización: 001298
Trace Number/No. de Seguimiento: 500225
Chip Read/Leitura del chip
Mode/Modo: Issuer/Emisor
US DEBIT
*****2465
AID: A0000000980840
Verified by PIN/Verificado mediante NIP
Operator ID/No. ID del Operador: 308

Date of Transaction/Fecha de Transacción:
March 09, 2022/Marzo 09, 2022

Time of Transaction/Hora de la Transacción:
02:37 PM EST

Sender/Remitente:
PATRICIA R CHAPMAN
5918 MAPI F DR, MI NJ, 08330, USA
6099922832/ 6099922832

Receiver/Destinatario:
SELECT PORTFOLIO SERVICES

Account #/ No de Cuenta: 0023529159

Code City/ Código de la Ciudad: OSWALD UT

Reference #/ No. de Referencia: NONL

Expected Payout Location/
Localidad donde Esperar Pago:
United States

Service Type/Tipo de Servicio:
Urgent

Transfer Amount/
Cantidad de Envío: 74.00 USD

Transfer Fees/
Cargos por Envío: + 19.90 USD

Additional Fees/
Cargos Adicionales: + 0.00 USD

Transfer Taxes/
Impuestos de Envío: + 0.00 USD

Promotion Discount/
Descuento Promocional: USD

Total / Total: 174.90 USD

Total to Receiver/Total al
Destinatario: 174.90 USD

For inquiries or comments in English, please write to./Para consultas o comentarios en español, escriba a.

1761.02

RECEIPT/RECIBO

Thank you/Gracias

Feb 19, 2021

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVIO:
103-081-1095

For Customer Service please call 1-800-325-
6000. Para comunicarse con el servicio de atención
al cliente llame al 1-800-325-6000

My WU# #
Total Points/Puntos Totales:

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT 3366, NJ

Payments/Servicio de Pago de Facturas.
DEBIT

Authorization Code/Código de
Autorización: 001466
Trace Number/No. de Seguimiento: 509081
Chip Read/Lectura del chip
Mode/Modo: Issuer/Emisor
US DEBIT
AID: A0000000980840
Verified by PIN/Verificado mediante NIP
Operator ID/No. ID del Operador: 321

Date of Transaction/Fecha de Transacción:
February 12, 2021/Febrero 12, 2021

Time of Transaction/Hora de la Transacción:
04:54 PM EST

Sender/Remilente:
PATRICIA R CHAPMAN
6910 MAPLE DR, ML, NJ, 08130, USA
6099922832

Receiver/Destinatario:
SELECT PORTFOLIO SERVICING

Account #/ 0023629159
No de Cuenta:

Code City/ OSWALD UT
Código de la
Ciudad:

Reference #/ NONE
No. de Referencia:

Expected Payout Location/
Localidad donde Esperan Pago:
United States

Service Type/Tipo de Servicio:
Urgent

Transfer Amount/ 1,800.00 USD
Cantidad de Envío:

Transfer Fees/ + 19.99 USD
Cargos por Envío:

Additional Fees/ + 0.00 USD
Cargos Adicionales:

Transfer Taxes/ + 0.00 USD
Impuestos de Envío:

Promotion Discount - USD

550.00



RECEIPT/RECIBO

Thank you/Gracias

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVIO:
440-856-9340

For Customer Service, please call 1-800-325-
6000/Para comunicarse con el servicio de atención
al cliente, llame al 1-800-325-6000

My WU#
Total Points/Puntos totales

EXECUTIVE CASH SERVICES
4450 BLACK HORSE PIKE, UNIT 3986, NJ

Payments/Servicio de Pago de Facturas:
CASH

Operator ID/No. ID del Operador: 1001

Date of Transaction/Fecha de Transacción: October 13, 2021/Octubre 13, 2021	
Time of Transaction/Hora de la Transacción: 12:46 PM EDT	
Sender/Remilente: PATRICIA R. CHAPMAN 5918 MAPLE DR, ML, N.J. 08330, USA 8099922832/8099922832	
Receiver/Destinatario: SELECT PORTFOLIO SERVICES	
Account #/ No de Cuenta:	0023529159
Code City/ Código de la Ciudad:	OSWALD UT
Reference #/ No. de Referencia:	NONE
Expected Payout Location/ Localidad donde Esperan Pago: United States	
Service Type/Tipo de Servicio:	
Origin:	
Transfer Amount/ Cantidad de Envío:	1 / 20.00 USD
Transfer Fees/ Cargos por Envío:	1 19.99 USD
Additional Fees/ Cargos Adicionales:	+ 0.00 USD
Transfer Taxes/ Impuestos de Envío:	+ 0.00 USD
Promotion Discount/ Descuento Promocional:	USD
Total / Total:	1,739.99 USD
Total to Receiver/Total al Destinatario:	1 / 20.00 USD

For inquiries or comments in English, please write
to:/Para consultas o comentarios en español,
escriba a:

WESTERN UNION
P.O. Box 8036

